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TO: U.S. Patent and Trademark Office **FROM:** Mark A. Wilson
Commissioner for Patents

EXAMINER: Robert B. MONDESI **PHONE NUMBER:** 650.620.5506

FAX NUMBER: 571-273-8300 **FAX NUMBER:** 650.620.6395

PHONE NUMBER: **DATE:** August 23, 2006

RE: U.S. Serial No.: 10/789,956 **TOTAL NO. OF PAGES INCLUDING COVER:** 19
Docket No.: SHE0081.00

☐ URGENT ☒ FOR REVIEW ☒ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE
RECYCLE

DOCUMENTS SUBMITTED

Transmittal PTO/SB/21
Reply Under 37 C.F.R. §1.111 Including Amendment and Remarks
3 months Petition for Extension of Time (in duplicate)

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PTO/SB/21 (07-06)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/789,956
	Filing Date	February 26, 2004
	First Named Inventor	Mary J. BOSSARD, et al
	Art Unit	1653
	Examiner Name	Robert B. MONDESI
Total Number of Pages in This Submission	Attorney Docket Number	SHE0081.00

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Reply Under 37 CFR Sec. 1.111 Including Amendment & Remarks and Facsimile Transmittal
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	NEKTAR THERAPEUTICS		
Signature	<i>Mark A. Wilson</i>		
Printed name	Mark A. Wilson		
Date	August 23, 2006	Reg. No.	43,275

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